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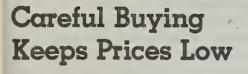
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School Lunch Wins Customers... And Praise

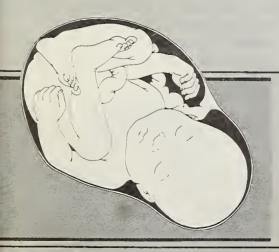
The school lunch program received excellent marks in a national evaluation completed earlier this year. Thanks to creative food service managers, participation in the program remains high. Page 2

Income Verification Helps Target Benefits to Children in Need

Starting this fall, schools across the country will be verifying income information on a sample of applications for free and reduced-price meals. Several school districts tried verification last year, with some interesting results. Page 5



Borrowing some planning techniques from private industry, school lunch managers in Mississippi are learning to get more food for less money. The difference is showing up in lower meal costs. Page 7



Video Teleconference Focuses on Nutrition For Mothers and Babies

A video teleconference held this spring brought together thousands of health and nutrition professionals. Tapes of the conference are now available. Page 10



Food and Education Go Hand in Hand In Oklahoma

The Oklahoma Department of Human Services reaches people of all ages with its nutrition education program. Communal dining centers offer monthly classes for the elderly. Page 17

School Lunch

Wins Customers...And Praise



Across the country, the school lunch program—a part of American life since the end of World War II—is back in vogue. School cafeterias are sprouting salad bars and offering new choices to keep up with student tastes in a generation where Apple brings to mind a computer as much as it does a healthful snack.

About half the student enrollment currently takes part in the National School Lunch Program, according to a recent survey by the National School Board Association. And, USDA figures show, lunch participation has been on the rise.

For the first 5 months of the 1982-83 school year, total average daily participation increased by 177,000 lunches, compared to the same period the previous year. Approximately 23.3 million students now participate each school day.

Last year's participation increases are even more striking because they occurred at the same time national enrollments were declining by about three-quarters of a million students. Particularly noteworthy is that the number of children served free meals—children who are most in need of food help—has jumped from 9.9 million to 10.2 million.

Local food service directors say participation remains high because parents believe that school meals are a good buy and are nutritionally better for their children than other meals.

Creative managers are getting results

School food service people are paying more attention to merchandising these days. They're finding new ways to make lunches more attractive to kids, and they're letting parents know that alternatives to school lunch, such as a good brown bag lunch from home, can be more expensive and offer less variety.

In New York, Richard Reed, chief of the state's bureau of school food management, reports participation increases in a number of his districts. He attributes this to stable prices and creative work on the part of school lunch managers.

For example, in Corning, New York, lunch manager William LaRock boosted his participation by 600 meals a day or roughly 10 percent by introducing a peanut butter sandwich bar in his elementary schools. It's similar to a salad bar, but children can put their own fruit and

nut toppings on peanut butter sandwiches as part of the meal.

In the Horseheads Central District, manager Peter Forcier offers a lunch that looks like a la carte, which children love. Actually the meal is a reimbursable lunch offering the five necessary components. Forcier has had such success with this and other initiatives that he's been able to reduce his prices.

Ann Toman, food service director in the rural district of Granville, specializes in getting students involved. She keeps participation high by going into the classroom and letting the children plan menus. Last Christmas she gave a raffle ticket to each child who bought a lunch, and held a drawing for a gingerbread house scene made by the cafeteria staff.

Creative, fun ideas like these attract children to a lunch program, Reed says. He encourages local managers to build their participation by "bringing business promotion right into the schools and not being bashful about it."

Marketing wins new customers

All over the country food service people have tried new ideas with great success in the past year. They've kept the lunch program viable by tightening up their management and taxing their ingenuity. Following are a few examples:

At Griegos Elementary School in New Mexico, students sit down at tables and serve each other family style instead of going through a cafeteria line. Teachers eat with the children, and everyone helps clear the tables. Principal William Chavez says the program has led to a more serene and popular lunchtime and less wasted food.

The Kansas School Food Service Association has printed pamphlets for schools to use in marketing school lunch. The pamphlets help parents see that the meal's a deal, and nourishing, too.

In Clinton, North Carolina, food service director Billie DeVane works hard to make lunches fun for children. The school offers "gracious dining" where students occasionally can eat lunch in a fancy set-

ting with tablecloths and lots of silverware. She also holds a party every month, where every child who has a birthday that month gets punch and cupcakes. These activities, along with expanded choices, have boosted participation.

Theme days are good participation boosters, too. In Knoxville, Tennessee, participation is extra good on Grandparents' Day, Thanksgiving turkey dinner days, and during National School Lunch Week, when many parents come and eat lunch at school with their children. John Carter, director of the city's school food service, says participation has remained a constant 58 percent of total enrollment. He attributes this to student involvement in menu planning and absence of price hikes.

■ In Quincy, Florida, food service manager and American School Food Service Association President Clarice Higgens increased her lunch participation by 200 children a day by setting up taste-testing committees and installing three new salad bars in the high school.

Some California school lunch managers have found price decreases can get dramatic results. Managers in Fairfield, California, rolled back lunch prices, and participation increased by 37 percent in the secondary schools, making the change a cost-effective measure. There was also a 10-percent increase in participation in the ele-



mentary school lunch program, mainly as a result of the favorable response to an offer-versus-serve plan that now gives children more choice in the foods they get for lunch.

In Jefferson County, Colorado, school food service manager Linda Schumacher uses a computer to track the most popular meals. She tends to the tastes of her students as well as to their nutritional needs. Included on her menus are sandwiches and chef or taco salads. which meet the same standards but provide a popular alternative to the traditional hot lunch.



Evaluation shows program is working

School lunch is a big part of a child's day, both nutritionally and socially. During the past few years, food service managers have coupled good management techniques with efforts to make the lunch period more enjoyable for students. They have also reached out to the community to involve parents.

The result has been a very positive outlook in the school food service industry, an outlook that is enhanced by the excellent review the lunch program received in a recent evaluation of the program's nutritional impact. The evaluation, released by USDA in April, is the first nationally representative public health and nutrition survey of the school nutrition programs.

The study, which was requested by Congress, took nearly 4 years to complete and looked at both the national school lunch and school breakfast programs. While the school lunch program received extremely high marks in the final report, the school breakfast program has further to go in reaching nutritional goals, the study concluded. The breakfast program generally does not provide meals that are nutritionally superior when compared to alternative breakfasts.

About 7,000 families throughout the country took part in the study, which provides an extensive body of current information on many aspects of the school nutrition programs, including the impact of federal school meal subsidies on family food expenditures.

Here are more details:

Nutritional impact of lunch

The study shows that the lunch program improves the nutritional intake of children from all income levels. The program is available in virtually all—about 98 percent—of public school districts in the U.S. While participation rates are higher among lower income students than among students from other income groups, substantial numbers of students from all income and ethnic groups participate.

The study shows:

Students who participate in the National School Lunch Program have higher intakes of energy and eight important nutrients than students who do not. Participating children get higher daily percentages of protein, vitamin A, riboflavin, vitamin B6, calcium, phosphorus, magnesium, and niacin.

The lunch program is superior not only when participants' nutrient intake from the noon meal is compared to that of nonparticipants, but also when nonparticipants' 24-hour nutrient intake is compared to that of nonparticipants. This means that program meals make a significant nutrient contribution compared to alternative lunches—a contribution which is not generally compensated for by other meals eaten during the day by non-participants.

Four of the nutrients for which lunch program participants show superior intakes—vitamins A and B6, calcium, and magnesium—are ones that typically are deficient in the diet of the school-age population, and therefore are especially important for children.

The study attributes the superior nutritional quality of school lunches to the well-balanced variety of foods that must be served under federal meal pattern standards.

Breakfast results

In contrast to the wide availability of the lunch program in the U.S., the breakfast program is offered in just 39 percent of school districts. These districts tend most often to be in low-income areas. Most school breakfasts—four out of five—are served to children qualifying for free school meals.

The availability of the breakfast program increases the likelihood that children will eat breakfast. Based on the study data, USDA estimates that if most schools chose to serve breakfast, up to 600,000 students nationwide who currently skip breakfast would eat a morning meal.

School breakfast participants naturally get better nourishment than students who eat no breakfast. How-



ever, the breakfast program is superior to alternative breakfasts for only three of the 11 measured nutrients: calcium, phosphorous and riboflavin. All are nutrients which, in most cases, are obtained by consuming milk or other dairy products.

Impact of family food expenditures

The study indicates that families whose children participate in school nutrition programs do not reduce their food expenditures at home when their children receive subsidized meals at school. This means they use the school meal subsidy as a supplement to, rather than a substitute for, family food spending.

The lunch program, therefore, is achieving one of its legislated goals: promoting the consumption of agricultural products by increasing the amount or quality of food obtained by participating families.

It also means the school lunch program is an efficient way of increasing the value of food available to participating families. For most families, each dollar of federal subsidy received through the program represents an average increase of \$1.00 in the weekly value of food obtained by the family. In contrast, it would require an increase of direct family income of about \$10.00 to have the same effective increase on food expenditures.

Participation

The biggest single determinant of school lunch program participation

is meal price. Holding other factors constant, students who pay higher prices participate less frequently. Also, the higher the price, the more participation drops off with price increases.

For example, at a lunch price of 40 cents, a 10-percent increase in price is associated with a 5-percent decrease in participation. At a price of 60 cents, a 10-percent increase in price is associated with a 7.5-percent decrease in participation.

Students whose parents report that the school lunch is less expensive, more convenient, and of higher nutritional value than lunch at home are more likely to take part in the program. This suggests that parent attitudes as well as economic factors affect participation levels.

In addition, more frequent participants in the lunch program are students who: are younger (under age 13); have parents who make the decision where to eat lunch; are male; cannot eat lunch at home; live in rural areas; and go to schools where the faculty and staff eat in the same dining area as students.

Income verification

The extensive data base provided by the study backs up the need for income verification in the school meal application process. The study data generally correlate with the findings of a report done by USDA's Office of the Inspector General (OIG) in February 1981.

The similar finding in both the National Evaluation of School Nutrition Programs and the OIG report is that a significant percentage of children receive free or reduced-price meal benefits for which they are not eligible. The national evaluation showed that about 21.8 percent of meal applicants were receiving excess benefits at the time the study was done.

Impact of 1981 legislation

Study results have allowed USDA to look more closely at how legislative changes have affected the meal benefits provided to students of various income levels. Among the

Income Verification Helps Target Benefits to Children in Need

changes made by the 1981 Omnibus Reconciliation Act were: increases in the maximum amount schools can charge for reduced-price meals; more stringent accountability on eligibility for free and reduced-price meals; decreases in subsidies for meals served to non-needy children; and increases in subsidies for meals served free to the neediest students.

Using the data from the national evaluation, USDA has compared the income characteristics of children receiving free and reduced-price meals before and after the 1981 legislation took effect. The data show that, across income groups, the poorest families were not affected by the eligibility changes.

The impact was greater for less needy families—that is, those with annual incomes of \$12,000 to \$20,000 for a five-person family with school-age children. The findings show that efforts to better target reduced-price meal benefits to lower middle-income children are working.

All students, regardless of family income, get a subsidized lunch under the program. While schools earn higher rates of reimbursement for meals served to needy children, even lunches served to children from higher income levels earn federal reimbursements in cash and USDA commodities currently worth about 30 cents a meal. That subsidy helps schools offer lunches at low cost even to students paying full price. The national evaluation showed that after the Omnibus Reconciliation Act took effect, average cost of a full price school lunch was 81 cents.

School lunch is still a bargain

The study proves what many people have believed for a long time: school lunch is indeed a very good deal. As local school lunch managers creatively accommodate new tastes and trends, they are continuing to make an old formula work well by providing balanced, wholesome food in a friendly, pleasant environment. The result is healthier children.

article by Jane Mattern Vachon



One of the conclusions drawn from the recent National Evaluation of School Nutrition Programs and earlier studies was a need for closer scrutiny of applications for free and reduced price meals.

Since 1981, schools have had the option of voluntarily checking the information parents submitted on applications. Starting this year, however, schools will be required to verify eligibility on a small sample of approved applications within 5 months of the beginning of school.

"We've tried to strike a balance between the need for verification and the difficulty of imposing a new requirement on already hardworking school officials," says George Braley, deputy administrator for special nutrition programs in USDA's Food and Nutrition Service.

Designed to help target benefits

Under the new requirement, school districts must verify 3 percent or 3,000, whichever is less, of the approved applications on file as of October 31 each year.

"We're requiring quite a small sample," Braley says. "Even in a large urban high school with a thousand applications for free and reduced-price meals, you're really talking about verifying only about 30 of the applications.

"While the new requirement will add some additional duties for school officials," he says, "the benefits in terms of improving the image of the program and directing spending to those genuinely in need are worth the investment in time."

Local districts will have broad flexibility in the methods they decide to use in confirming eligibility. Some schools might choose to require parents to present documentation, such as proof of current participation in the Food Stamp Program, or a check stub from an employer. Others may check with state employment offices or other agencies that would have information on a family's income.

The new requirement does not change the application approval process. The verification takes place after the applications are approved, and school administrators have up to 5 months after the beginning of school to complete the needed sample.

The National Evaluation of School Nutrition Programs was not the first study to highlight the need for better accountability. A 1981 report by USDA's Office of the Inspector General showed that a significant percentage of children's applications understated family income.

"This came as a surprise to many of us," Braley says. "I think it's important that we've taken some steps since then—calling for social security numbers on applications, for example—to begin to deal with the problem.

"Now we're following through with a system to reduce underreporting of income. I think this is the best way for all of us in the school food service field to protect the good name of the school lunch program." Prior to the 1981-82 school year, school districts could verify income information only if they had reason to suspect it was not correct.

Has been tried in some areas

During the 2 years that routine income verification has been allowed, many school administrators who have tried it on a voluntary basis have been pleased with the results. "They've found it does help target benefits to children who are legitimately entitled to them," Braley says.

Patricia Barker in Beaumont, Texas, is one of several school food service directors around the country who tried voluntary verification this past year as part of a USDA pilot study. She's found that verification has made her lunch program stronger and more accountable.

"As a taxpayer, I think it's a good thing," says Barker, whose district has 11,000 students in the lunch program, about a quarter of whom get free or reduced-price meals. "I honestly feel the verification this year did deter fraud."

Barker has found that asking for

documentation works best. "We ask parents to bring in employment check stubs, food stamp papers, whatever they have," she says. Telephone checks can be more difficult, she adds, because working parents are hard to catch at home. "But," she says, "once we reached them by phone it was not hard to get the information." Barker has also used computer checks through the state welfare agency to verify information.

Lucille Lee, food service director in Las Lunes, New Mexico, has found that community knowledge of verification activity is a helpful deterrent to abuse. "When you begin to call parents in a small community like ours, it gets around—people talk to each other. So I feel it will have an added impact this year because people know we were checking on the information last year. I think they'll be a little more cautious when they apply again," she says.

Verification has not been without its problems for Lee. "About 1,800 applications for free and reduced price meals come in to one central office, and you process them all yourself," she says. "When you send letters out to the parents, you can't get them to respond."

But she feels that verification, however it is done, is important in countering some people in the community who do falsify their applications. "I've seen for many years that we need to have some kind of control. We needed to let people know that we have the authority to check the information," she says.

"I know that many people will say, 'Verification can't be done. We don't have time to do it.' But I feel if it will help cut out the fraud or abuse in the program, we ought to be willing to try."

Educating parents is important

In North Carolina, Pitt County food service director Donna Ware has discovered the verification process has opened new lines of communication with parents. Educating them as to why the school was verifying was an important part of the process.

"It's been a real surprise for us, but we have found that the majority of parents have not minded submitting the information once they understood what was needed. Many of them contacted the school to get some help from the principals, because this was the first time," Ware says.

A new measure of accountability

Income verification will bring a new measure of accountability to the lunch program, which provides essential nourishment to nearly 12 million low-income and 11 million higher-income children every school day. According to USDA, the new requirement strikes a balance between the need for program integrity and a minimal administrative burden for school officials.

"I think school food service people are as interested as we are in a strong school lunch program," says George Braley. "We want to work together to do whatever it takes to maintain the program's fine image." article by Jane Mattern Vachon



Careful Buying

Keeps Prices Low

Many schools are finding they can save on meal costs—and keep lunch prices low—by using more USDA-donated foods. But what about savings on food they buy themselves? Mississippi is taking the lead in helping school districts look at their buying practices in a new way, using something called "critical path analysis."

For years, the concept of critical path has been important in industries that depend on getting the right materials to the right place at the right time. In simple terms, critical path is a management technique that charts a flow of activities with checkpoints at critical spots. The goal is to make sure that the total project or system is kept on course.

Together with his staff, John Walker, assistant director of finance for the Mississippi Department of Education, has developed a system schools are using to "smooth out" the critical path in procuring food for their lunch and breakfast programs.

According to Marlene Gunn, who supervises school programs for Walker, schools using this system examine every step in food procurement-from the time menus are planned to when the bills (invoices) are paid. They look at how menus are planned, how order forms are developed, how orders are placed with distributors, how foods are received and stored, and how distributors are paid. Local food managers can smooth out their critical path—and achieve greater efficiency-if they can identify and eliminate any bottlenecks in the system.

Survey showed need for changes

Walker credits Marlene Gunn with the state's recent accomplishments in procurement. "When Marlene came with us," he says, "she did a survey that showed the differences in food prices being paid by adjoining school districts. The wide differences in costs, in some cases for the same product, indicated that something needed to be done."

More than 85 percent of Mississippi schools participated in the survey. A number of school districts were already using good bid procedures for food, but many were simply buying from distributors without using bids at all.

For example, in October 1981, canned goods and staple food items were being bid in only 22 percent of the schools. Meats were being bid in only 20 percent, and fresh produce was bid in only 18 percent. Districts using bids were tending to get lower prices than those that were not.

In some instances, Gunn found, vendors were charging a variety of prices for the same item. One distributor's price for sliced peaches ranged from \$12.97 to \$21.38 for the same quality product. The size of the school district, the amount ordered, and the size of the food package did not always have an impact on cost.

The state department of education staff felt the survey demonstrated that better procurement could help schools get more for their money. They decided to offer a series of workshops for all school districts in the state, then select several districts for pilot projects that would test two different buying systems. An important part of the plan was working closely with distributors so they would understand what the state was trying to accomplish.

Meeting with distributors was the first step. In early spring of 1982, representatives from every distributor selling to schools were invited to a state meeting.

"We pointed out that we were not trying to make rules to eliminate anybody," Gunn explains, "but were trying to develop an open and free competition in school buying. This way the distributors understood that they were going to have to change their sales approach to schools and to some extent change the bid procedures with them."

The state staff shared survey results with the distributors and let them draw their own conclusions about the wide discrepancy in prices charged to schools. Looking at all factors, Gunn says, it was clear that food service people were not always using the best buying practices, or the differences in prices would not have happened.

Workshops reach local managers

During the 1981-82 school year, the state held 22 regional workshops for local school food service personnel. The sessions focused on federal procurement guidelines, traditional line item bidding, and price quote procedures.

During the 1982-83 school year, the state held additional workshops to familiarize local food service directors with the critical path concept. Participants learned about developing specifications, ordering, and estimating quantities. At these workshops, food service administrators could analyze the critical path in their districts to see if there were steps creating too much paperwork or causing problems, such as not having a needed food at the right time.

Workshop participants also learned to examine inventory and organize storerooms. To save steps, food managers were taught to organize storerooms in the same manner as the order sheets are organized. They were encouraged to identify what are called "par stock" items—certain foods that are used every week—and keep a specific amount on hand for better inventory control.

Throughout, the workshops emphasized bidding procedures and the importance of listing quantities on all bids. "In the past, some of our bids did not specify quantities, so distributors were having to bid without knowing whether they would be selling one case or 300 cases. There was no way to get the best price by bidding in that fashion," says Gunn.

To project proper quantities, the critical path and menu planning have to be worked out. School food supervisors learned they need to have a standardized set of cycle menus just as they have a standardized set of recipes.

In each workshop, the supervisors were asked to bring every menu they had used during the preceding 4 months. They then placed them in stacks by entree to see how many entrees each school typically uses. Generally, the exercise showed, the number of entrees varied from 25 to

35, so the state staff recommended that the typical school district problably needs a standardized menu cycle with 30 menus. Gunn feels that fewer than 30 menus does not provide enough variety.

Another recommendation was that each school list the menus on file cards with space for participation data. This makes it easy for food supervisors to evaluate the popularity of the menus. An order guide on the back of the menu card helps managers develop food orders.

"If the school food manager places standardized menus on cards, she can use the cards at random to avoid having hamburgers every Tuesday. When a month's menus are planned, the manager can put the entree on Tuesday one week and somewhere else later in the month. In this way, the managers have the flexibility they need and can put in some special menus they may use only once a year," says Gunn.

This card system benefits students as well, since managers can simply pull any menus that are not well received and replace them with other cards.

To assure consistency in bidding, schools must have food specifications. But who should write the specifications? Many workshop participants and distributors suggested this should be done by the state office. Gunn doesn't agree. She feels that the person who is going to take the bids and analyze them in terms of quality and price should come up with the specifications.

"The same person who receives the food must write the specifications to understand what the words mean," she says. "As a state agency, we do not think it is our role to tell a district to use a certain specification because food tastes vary too much. Decisions about food quality should not be removed very far from the point at which the child is being fed."

Projects begin in four areas

As local school food managers were putting to use what they learned in the workshops, four districts began working more closely with the state staff on pilot projects.

The projects, which are continuing this school year, test one of two variations of a basic food purchasing model. In both variations, items are bid on a bottom line basis. The difference is the pricing method.

With one method, schools pay a fixed fee for service plus the distributors' actual cost for the product. Items are normally bid for a year, and distributors can pass along any increases or decreases in the price of food. However, the fixed fee for service cannot change for the life of the contract.

With the other method, all items have a set price which cannot change until the contract runs out. Foods under this type of arrangement will normally be rebid every 60 or 90 days.

Debbie Turman, food service supervisor for the West Point Separate School District, is testing the first method. She now puts out yearly bids for the food she buys and currently uses three distributors. One of these distributors also delivers USDA-donated foods.

Turman says she likes the new system and the flexibility of writing her own food specifications. After writing the specifications, she talks with every distributor about the different products they will be offering in their bids. By doing this, the issue of food quality is cleared up before the bidding process begins.

As it has turned out, distributors have had to add very few, if any, items to their existing product lines to meet Turman's quality standards. In order to bid on a product other than that specified, Turman requires distributors to show her that the quality is comparable. "I expect the distributors to do their job and show me what products they think will please me," she says.

School cafeteria managers in West Point have accepted the new system well. Procurement now involves only 2 days a week for them. On Monday, they send in weekly food orders to Turman's office. On Friday, they receive the foods and check them in. According to Turman, the time saved each week is well worth the small extra effort it takes to put out yearly bids.

A special arrangement with one of

her commercial distributors is making ordering even faster. Turman uses a hand-held computer to order some of her foods from Purnell's Pride, a full line distributor in Tupelo. The mini-computer works through a telephone hook-up and can recall the last order that was placed. It can also provide summaries of past food orders. Turman phones in orders for her schools on Mondays but can change them as late as Thursday for delivery on Friday.

Turman recalls her anxiety when she began using the equipment. "I called the computer operator at the distributor after placing my first order to see if it was received," she says. "I could tell immediately that it came through fine because of the cheering I heard at the other end."

Distributors see positive changes

Murle Kitchen, food service manager at Purnell's Pride, says he's seen Debbie Turman and other school food administrators become more sophisticated as a result of the new food procurement system. He believes school food managers are now getting more competitive prices and are more attentive to food quality.

Efficiency has also increased at his distributorship, he adds, because bids are done only once a year and any updates on food prices can be done through his computer system. And, he says, if school purchases are handled strictly from a bid standpoint, prices should be just as good or better than for any other commercial buyer.

As part of the critical path, distibutors' records are routinely examined to ensure correct prices have been charged. Kitchen says he does not mind the audits and understands the necessity of checking his vouchers. He feels good communication between the distributor and the purchaser is essential.

If school officials do not plan and communicate well with distributors to let them know what products they need, they may miss out on opportunities to lower their food costs. If a distributor can meet schools' needs with his existing product lines, he

can usually offer lower prices because he's selling foods he buys in volume. Individual special orders are more expensive for distributors and, therefore, for schools.

John Walker and Marlene Gunn believe the new procurement activities have been successful because they have had good cooperation from local school officials and commercial food distributors. In some areas without pilot procurement projects, school superintendents have begun working together to upgrade food service operations.

In 12 districts where only the school principals had been in charge of food service, school food service operations are now centralized. The districts have hired a qualified food service supervisor to work with the school principals. In meeting their need for better food procurement, the districts took steps that upgraded the overall quality of food service management.

Changes also made in commodity system

Mississippi's efforts to "look at the whole" of food procurement have included dramatic improvements in the way the state distributes foods donated by USDA. Prior to 1982, USDA commodities were distributed at 12 carstop points throughout the state. When the commodities arrived, each school district would be called upon to pick up their share of the foods for delivery to schools or warehouses.

Now commodities go directly to commercial distributors that are selected through the bid process. This system is more advantageous to local school districts in several ways. First, they can take foods out of the commercial facilities as they need them. Also, since none of the districts have refrigerated trucks, any frozen or refrigerated items are now handled better. Another big advantage is savings—commercial food delivery costs can often be decreased by consolidating deliveries of commodities with deliveries of purchased items.

Schools have 60 days to withdraw the commodities from the time they are received by the commercial distributor. Schools can store foods



Debbie Turman, food service supervisor for the West Point Separate District, orders food using a special mini-computer with a telephone hook-up.

Turman is one of several food service managers participating in pilot buying projects in Mississippi.

more than 60 days but incur an additional cost. "Our distributors have cooperated well with us on storage of commodities and have not yet charged us a penalty for keeping some commodities past the 60 days," Walker says,

Commercial distributors deliver donated foods to schools every 2 weeks. If a distributor is also supplying a district with commercially purchased foods, the district can receive their donated foods weekly along with deliveries of purchased food

With distributors storing donated foods, many school districts have been able to reduce the amount of freezer space they use or, in some cases, shut off freezers completely. This has significantly reduced utility costs. The savings in staff time are significant, too.

"With the new system, you have better control over when you get the commodities," says Walker. "Under the old system, you may have had commodities at several different locations, and all had to be picked up the same day." Sometimes pickups had to be made on non-work days—many times, for example, frozen turkeys arrived on holidays. "Now," Walker adds, "the foods are delivered when you need them and you work the system instead of the system working you."

The improved storage and shipment system for commodities has cut down on contamination and theft, and has resulted in significant savings for the state. According to Walker, the direct savings for the 1982-83 school year alone totaled almost \$450,000.

Recent improvements add up for schools

How much are schools saving as a result of the combined management improvements? While it's hard to pinpoint exact savings in each area, the total picture shows that food costs for schools are indeed down. For the 1982-83 school year, the state's cost accounting system shows food costs were 7 cents per meal less than the previous year.

This year, the state has added five new pilot procurement programs to the four continuing from last year. The results in these districts will help others select the best buying methods for them.

Critical path analysis has played a key role in the improvements made during the past few years. But, says John Walker, it couldn't have been effective without the cooperation, professionalism, and dedication displayed by school food service people throughout the state.

For more information on food procurement or commodity distribution in Mississippi, write:
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article by Kent Taylor

Video Teleconference Focuses on

Nutrition For Mothers and Babies



The Georgia Mental Health Institute in Atlanta was one of 125 teleconference viewing sites. On the day of the conference, this satellite receiver

picked up the signal broadcast live from Washington, D.C. Approximately 150 people from throughout Georgia came to Atlanta to participate.

On a blizzardy day in April, 85 dietitians, nurses, and county home economists from all over New Mexico wound their way into Albuquerque. Some had traveled 250 miles through the storm to be there. They were coming to see and participate in the largest federally produced video teleconference in history, broadcast live via satellite from Washington, D.C.

Joining them in Albuquerque and in hotels, hospitals, and television stations in cities throughout the country—were WIC nutritionists, Extension specialists, pediatricians, teachers, hunger advocates, professionals from school food service, and members of organizations like the March of Dimes and Red Cross.

Bound by a common interest in protecting and enhancing the nutritional status of our nation's mothers and children, approximately 10,000 health and nutrition professionals convened at nearly 125 viewing sites for the simultaneous broadcast.

The teleconference—titled "Improving Nutrition for Mothers and Babies: A Research Update"—featured 11 well-known experts from the American scientific community. Panelists presented key research findings in maternal and fetal nutrition, and, thanks to special telephone hook-ups at all the broadcast sites, spoke directly on the air to participants calling in questions from across the country.

A joint effort of several groups

The 3-hour video teleconference took the better part of a year to plan and was the result of a collaborative effort between the U.S. Department of Agriculture (USDA), the U.S. Department of Health and Human Services (DHHS), and coordinating committees in each state. The Public Service Satellite Consortium, a private nonprofit organization, handled the production and other technical aspects of the program.

PSSC has had extensive experience producing video teleconferences for educational and other purposes.

The teleconference had two central aims. One was to provide nutrition and health professionals with up-to-date research information and encourage them to apply the findings in their work. The other was to strengthen state-level networks in the area of maternal and infant nutrition and health.

According to Dr. Luise Light and Dr. Lenora Moragne, who headed the teleconference planning team from USDA and DHHS, the teleconference was designed to serve as a catalyst for furthering the team approach in working on maternal and infant nutrition and health. Particularly significant, they feel, is that the teleconference gave public health nutritionists and Extension food and nutrition specialists from land-grant universities an opportunity to work together on a project.

USDA's Anne Brown, who coordinated the teleconference, says nutrition and health professionals are natural constituencies of the two Departments. "They are the ones who need and use this kind of information," she says, "and they can disseminate it further through lots of different channels."

The planners felt it was important to have a diverse group of professionals participate. "We wanted to foster communications among people who may view issues from differing perspectives and experiences," Brown says, "and also to have the various nutrition and health communities hear the same messages about maternal and infant nutrition."

Teleconferences offer several advantages

The use of this form of satellite communication had already proved itself to be beautifully suited to the transmission of technical and continuing education kinds of information. USDA first tried video teleconferencing as a tool for communicating nutrition research in 1981 and found it an effective way of disseminating complex material to a large professional audience.

"There are a number of advantages to video teleconferencing,"

says Anne Brown, who coordinated both of the teleconferences. "A video teleconference can provide nearly the same degree of face-to-face interaction as a traditional conference, but it can involve an almost unlimited number of people. And, participants don't have to spend days away from the office or dollars on travel and lodging.

"Teleconferences are also an expedient way of delivering information," she adds. "The graphic and visual techniques employed often increase the impact of the information conveyed and make it easier to remember. Since the viewer has direct access to the source of information, there's less error, and transferring critical or difficult information is more efficient."

The April 1983 conference cost each Department \$45,000 in production expenses, not counting the time and salaries of federal and state employees who contributed many hours to planning and coordinating the event. At the federal level, seven representatives from various USDA and DHHS agencies worked on the planning team. In each state, USDA and DHHS solicited the help of a Cooperative State Extension Service food and nutrition specialist and a state department of health nutritionist, who set up and co-chaired coordinating committees.

The state coordinating committees accomplished many important tasks, including identifying potential topics, publicizing the event, making arrangements for viewing at the local sites, disseminating packets of background materials, and assisting the federal task force in evaluating the teleconference. State coordinating committees invited many different groups of professionals working in maternal and infant health. They were free to tailor arrangements to respond to the needs and interests of professionals in their states.

Two main areas of interest selected

The federal task force gave states the lead in determining the topics for the teleconference and discovered widespread interest in two subjects: substance abuse and its effect during pregnancy, and lactation and breastfeeding.

After narrowing substance abuse to those issues most directly linked to nutrition and nutritional status—namely, the effects of tobacco, alcohol, and caffeine—federal coordinators began their search for key scientists with significant research experience in these areas.

Central to the goals of the teleconference was the task of communicating to conferees ways to apply research findings at the community level. Health and nutrition professionals are a vital link to helping women achieve good nutrition during pregnancy. They not only provide pregnant women and new mothers with the best available dietary information, but also play an important role in helping expectant mothers adjust to the special nutritional demands of pregnancy.

The 11 panelists selected for the teleconference were asked to present relevant research as well as suggestions on how health and nutrition practitioners might help mothers make informed choices. They were free to select and discuss data from any source, government or otherwise, and the views they expressed



Research on the special properties of breast milk underscores the importance of encouraging mothers to breastfeed. "Mothering the mother"

can make the difference in ensuring a successful breastfeeding experience, panelists told teleconference participants.



reflected their own unique perspectives and areas of expertise.

The panelists hailed from diverse backgrounds—with specialties in everything from anthropology and psychiatry to dietetics and obstetrics—and all were excited by the prospect of participating in the teleconference and reaching such a wide audience.

"The teleconference provided us with the opportunity to bring the subject of human lactation into sharp focus for medical practitioners," says Dr. Ruth Lawrence, an expert in human lactation with special experience in working with nursing mothers.

Lawrence, an associate professor of pediatrics and obstetrics and gynecology at the University of Rochester School of Medicine, says there's been a lack of adequate information about breastfeeding among health practitioners. Over the years, this has presented difficulties as more and more people have been seeking this information. "This was our first big chance to reach the practitioners," she says.

For Dr. Henry Rosett, the teleconference provided an opportunity to reach a group of health professionals he'd never before had access to—nutritionists. Dr. Rosset is a clinical professor of psychiatry at Boston University's School of Medicine and director of its Fetal Alcohol Education Program.

"Participating in the teleconfer-

Highlights of Research Findings On Substance Abuse and Breastfeeding

For centuries, mankind has been concerned about the diet of pregnant women. In times of war and famine, expectant mothers have received special consideration. This practice has proved to be well founded.

Today, health professionals know that nearly everything a pregnant woman consumes reaches her unborn child, in one form or another. A nutritious diet during pregnancy makes a significant difference in protecting and enhancing the wellbeing of mother and baby alike.

Unfortunately, many of the mechanisms that help transport nutrients across the placenta to the fetus also allow the transmittal of harmful substances. Changes in the diets of pregnant women in the last half century have included some new consumption patterns—ones that health professionals have been studying for possible harmful effects during pregnancy.

In particular, experts have been watching three substances—alcohol, tobacco, and caffeine—and testing their safety. The widespread availability of these substances today, and their extensive use among women of childbearing years may have serious health implications.

Today's health community is asking: How many women are using these substances during pregnancy? Are these substances having harmful effects on fetal development? When is the fetus in danger of being harmed by these substances? And, if there are potential harmful consequences, what can health professionals to do help mothers avoid or minimize them?

Panelists participating in the video-teleconference provided the following insights:

Alcohol

Although adverse effects of alcohol on fetal development have been suspected for more than 250 years, the discovery of a specific pattern of abnormalities known as Fetal Alcohol Syndrome (FAS) has served to focus increased scientific attention on the problems of drinking during pregnancy.

FAS is characterized by prenatal and/or postnatal growth retardation, damage to the central nervous system, and distinctive differences in facial features. Children demonstrating signs of FAS may also have external malformations affecting their eyes, ears, nose, and throat, in addition to internal abnormalities.

The occurrence of FAS is judged to be between 1 in 300 to 1 in 2,000 live births. Mothers of FAS babies are chronic alcoholics who drank heavily throughout pregnancy. Heavy-drinking mothers-to-be can also give birth to infants who show signs of being affected by maternal drinking without having the syndrome. These infants are diagnosed as having Fetal Alcohol Effects (FAE).

To understand how maternal drinking affects the unborn child, scientists have studied how ethyl alcohol "acts" in the body, once it's ingested. It is now known that:

Alcohol can alter the structure of cell membranes, and can disturb the organization of embryonic tissue during the first 3 months of pregnancy.

Throughout pregnancy, alcohol can act on the metabolism of carbohydrates, fats, proteins, and the synthesis of RNA and DNA—retarding cell growth and division.

Large quantities of alcohol during pregnancy can cause fetal malnutrition even when the mother's diet is adequate, because the alcohol interferes with the transport of essential nutrients across the placenta.

The biochemical effects of alcohol are related to its concentration. An episode of heavy drinking at a critical phase of prenatal development can harm the fetus.

High blood concentration of alcohol during the last 3 months of pregnancy can be detrimental to the growth of the fetus' central nervous system and future intellectual and behavioral development.

Experts do not yet know exactly when or how much drinking harms the fetus. There does not appear to be any "safe" time to drink during pregnancy. Light drinking (less than one ounce of absolute alcohol daily) has not been demonstrated to be dangerous, but cautious mothers-to-

be may decide to abstain altogether.

Tobacco

Twenty years ago, not much was known about the adverse effects of smoking during pregnancy. The Surgeon General's 1964 report on smoking and health covered the subject in just one paragraph and a few references. But by 1979, evidence linking cigarette smoking to complications for the pregnant woman and her child had grown dramatically. The report that year included nearly 100 pages and several hundred references documenting this research.

Today, cigarette smoking is recognized to be the single most important identifiable contributor to perinatal mortality—that is, death occurring during the period from 8 weeks prior to birth to 4 weeks following birth. Yet, in spite of the risks, presently about one-third of all women and two-thirds of all teenagers who smoke continue to smoke during pregnancy.

Research findings show that:

Women who smoke run a higher risk of certain complications, such as vaginal bleeding during the third trimester of pregnancy. The occurrence of complications seems to increase with the number of cigarettes smoked.

Infants born to smoking mothers weigh, on the average, 200 grams less than babies born to comparable women who do not smoke. Birthweight is inversely related to the number of cigarettes smoked.

The risk of spontaneous abortion is 30 to 70 percent higher among pregnant smokers than among non-smokers—and increases with the number of cigarettes smoked.

The rate of premature deliveries increases significantly with the amount the mother smokes. About 13 percent of all preterm births can be attributed to smoking.

For women who smoke more than one pack of cigarettes a day, there is an increase in perinatal mortality of about 37 percent. Smoking less than one pack of cigarettes a day is associated with a 24 percent increase in perinatal mortality.

Research also suggests that the adverse effects of smoking extend beyond the prenatal period:

Smokers' children have more hospitalizations, more visits to the doctor, and are more likely to be victims of Sudden Infant Death Syndrome.

Several studies suggest that in older children, maternal smoking can hinder physical growth, intellectual ability, emotional development, and behavior.

Short of quitting or cutting down on the number of cigarettes smoked, is there anything mothers can do to offset the adverse effects of smoking? The experts say switching to low tar, low nicotine cigarettes will have no effect. On the other hand, it appears that improved nutrition can partially offset the effects of smoking.

Caffeine

In the last few years, there has been a great deal of attention focused on the safety of caffeine consumption. One area of special concern has been its use during pregnancy.

In the fall of 1980, the Food and Drug Administration reported a study in which pregnant rats were fed caffeine at various levels. The study found evidence of growth retardation in the offspring of rats consuming the human equivalent of two cups of coffee a day. A 1982 Boston study of 12,000 pregnant women, however, showed no relation between coffee consumption and low birthweight, early births, or malformations.

Although caffeine is known to cross the placenta, there is little evidence that caffeine has a harmful effect on the human fetus. It appears that moderate caffeine consumption may not be harmful. However, experts advise pregnant women to avoid heavy consumption.

Breastfeeding

Today's health and nutrition experts agree—human milk is the ideal source of nutrients for most infants. In the 1980's, mothers are being encouraged to breastfeed by many national and international professional groups including the American Academy of Pediatrics, the American Dietetic Association, and the American Medical Association.

In recent years, new methodologies and sophisticated equipment have allowed scientists to gain new knowledge about the composition of human milk and how nursing contributes to the health of infants and their mothers. As breast milk's special properties are increasingly documented by research, it is clear that it is uniquely suited to the needs of the developing infant in ways that formula cannot match.

Experts have found breast milk provides the building blocks needed for energy and growth, and also has a wide variety of functional capabilities that match and complement the physiological needs of the infant. For instance, breast milk:

- provides protection against human viruses and infectious diseases;
- increases baby's absorption of needed nutrients:
- protects against excess growth of harmful bacteria in baby's intestinal tract:
- doesn't overload baby's system with hard-to-process substances; and
- changes in composition over time to better meet the baby's changing needs.

Mothers benefit too from breastfeeding. Nursing helps mothers return to their pre-pregnant shape more quickly by its action on the uterus and its use of fat stored during pregnancy. Breastfeeding is also less taxing physically for mothers, since feeding time is less hectic and more restful than formula feedings.

Since the early 1970's there has been a steady increase in the proportion of breastfed babies in the United States. However, the increase has been primarily among babies born to mothers with college degrees. In 1981, only 35 percent of infants were breastfed for 3 or more months.

Before the 1970's, women's employment status appeared to be unrelated to whether or not they chose to breastfeed their first-born. Today, although more working mothers are breastfeeding than in previous decades, researchers are finding that mothers who are employed full-time have difficulty continuing to breastfeed once they return to work. This finding poses a great challenge for health practitioners who hope to help working mothers continue to breastfeed.

ence was very worthwhile," he says. "I'm primarily a medical educator—most of my educating has been toward medical audiences. I'd never considered nutritionists as a potential counseling group before." Nutritionists, Dr. Rosett feels, can play an important part in identifying mothers with drinking problems and in providing them with information that can motivate them to change their behavior.

Conference divided into two parts

The teleconference was divided into two 90-minute segments. Experts on substance abuse made presentations during the first half, and experts in lactation and breast-feeding spoke during the second half. Each 90-minute segment included time for viewers to call in questions and speak with panelists.

"We had some misgivings about the teleconference at first," says Paulette Ybarra, an Extension specialist who helped organize the screening in Georgia. Research presentations can be dry and academic, Ybarra observes, and she hoped the teleconference wouldn't leave participants feeling bored or "trapped for

3 hours." Her concerns evaporated the day of the conference. "Every speaker was so exciting and personable," she says.

Ybarra's reaction was echoed by Alma Saddam, one of Ohio's coleaders. "It was a super conference and very well organized," she says. "They chose the best speakers, the best resource people."

The two half-hour call-in sessions gave audience members the opportunity to adapt the teleconference to their individual interests. One viewer, for example, asked about the latest research on the effects of caffeine contained in over-the-counter drugs. Another wanted to know when it's safe for a breastfeeding woman to drink.

Many members of the audience took the call-in opportunity to ask the panelists "how to" information—such as ways to persuade expectant mothers to stop smoking or what to tell mothers of premature infants about breastfeeding. Of special interest to the teleconference audience was information experts presented on working with mothers-to-be to help them cut down on their drinking and to encourage new mothers to breastfeed.

Working with problem drinkers

Dr. Henry Rosett has had extensive experience working with pregnant women with drinking problems. During his presentation, he shared findings from his clinical experience at Boston City Hospital and results from a study he and his colleagues performed involving 1,700 women registered for prenatal care.

In his study of this group, Dr.
Rosett found that 40 percent of the women drank moderately and 50 percent hardly drank at all. Ten percent had serious drinking problems. Although no "safe" level of drinking has been established, Rosett said, research has not linked "occasional" drinks to harm to the fetus. But women who drink upwards of five to six drinks on some occasions or 45 drinks a month are putting their babies in real danger, he said.

Dr. Rosett defined a "drink" as one-half ounce of absolute alcohol, the equivalent of a 12-ounce beer, a 4-ounce glass of wine, or a cocktail containing a one-ounce shot of 100-proof liquor. At the Boston City Hospital clinic, Dr. Rosett's team discovered that approximately one in 10 women coming to the prenatal clinic were drinking heavily—and averaging nine drinks a day.

Combining alcohol screening with routine prenatal care, the medical team used a diet history questionnaire to learn about each patient's eating and drinking habits. In the course of a 10-question survey, clinic personnel asked each patient about food and beverage consumption, including questions about non-alcoholic beverages and individual questions about beer, wine, and hard liquor.

The survey helped medical professionals take a systematic drinking history. "It gives you an idea of the estimated risk involved and also heightens women's awareness of their own practices," Dr. Rosett said.



Teaching tools like this March of Dimes chart help mothers visualize how their babies grow. Researchers in Boston found that many mothers with drinking problems were motivated to change their behavior once they understood how it could affect their babies' development.

He discovered most pregnant patients responded readily to the clinician's information about drinking and its effects on unborn children. Two-thirds of heavy drinkers stopped drinking heavily within 2 weeks after learning of the potential harm drinking could do to their babies.

A helpful, nonjudgmental attitude by health professionals is essential, Dr. Rosett told teleconference participants. Health care providers need to get across the idea: "We want to help you have a healthy baby."

"We found that heavy drinkers, when pregnant, were motivated to stop drinking because of their concern for their unborn child," said Dr. Rosett.

But even with encouragement and information, a few pregnant women in the study were unable to alter their heavy drinking. In cases like these Dr. Rosett advised, health professionals need to refer the women to alcohol treatment programs right away.

It's crucial to get help for alcoholic mothers as early in their pregnancies as possible. Dr. Rosett found that infants born to mothers who had quit drinking heavily before the third trimester showed significantly fewer harmful effects than babies born to mothers who continued to drink heavily throughout their pregnancies.

Helping mothers to breastfeed

Several panelists at the teleconference expanded upon the research discussions to share advice on how to work with expectant and new mothers to encourage and assist them in breastfeeding their infants.

"In our culture, women rarely have witnessed breastfeeding when they have their own first baby," Dr. Lawrence told viewers. "For them, it is a learned behavior." As a consequence, a great many of the difficulties mothers have with breastfeeding are related to inadequate knowledge.

According to Lawrence, mothersto-be make up their minds early whether or not they will breastfeed. Health professionals, she said, should take advantage of a woman's early prenatal visits to discuss



breastfeeding with her and provide her with information.

Practitioners can use the prenatal breast exam as an opportunity to reassure the patient that nature prepares the breast for nursing during pregnancy, and to explain the process of lactation. Women may be aware of the advantages of breast-feeding but be fearful that they will have problems supplying their babies with enough milk. They may worry that nursing will tie them down, make it hard to lose weight, or spoil the appearance of their breasts. Informed health practitioners can lay these fears to rest.

Expectant mothers who choose to breastfeed should be encouraged to discuss their plans with their spouse, panelists said. Breastfeeding involves the whole family, explained Dr. Audrey Naylor, who teaches community and family medicine and pediatrics at the University of California's San Diego School of Medicine.

New mothers need instruction, encouragement, and privacy right after the baby arrives to get nursing off to a good start. Breastfeeding is a "biological partnership" between mother and baby, the experts stressed.

Frequent nursing helps stimulate a good supply of milk, so mothers should be encouraged to put the baby to the breast within the hour of birth and then every few hours for the first several weeks. Nursing mothers also need a good diet and time to rest and relax. A lactating woman needs to get an extra 500 calories daily and plenty of calcium and vitamin C.

"A good nutritionist can tell mothers how to select foods that will fit within their budgets as well as what foods to eat," Dr. Naylor told the teleconference audience.

It's important to "mother the mother"

As for helping new moms relax, Dr. Lawrence encouraged health professionals to give nursing women plenty of encouragement and tender loving care. "Mothering the mother," she said, "may make the critical difference" in ensuring a successful breastfeeding experience for women.

The teleconference included a videotape of Dr. Naylor's San Diego Lactation Clinic, which has been helping families in that community learn to breastfeed their children since it was founded 5 years ago.

There, trained professionals teach breastfeeding techniques and provide information and support to families in both the prenatal and postnatal periods.

Dr. Naylor's staff makes sure to have new mothers bring in their babies within a week of their birth to make sure mother and baby are doing well. If problems exist, they help families work them out before they become discouraged. The clinic has a 24-hour hotline where families can call for advice and encouragement. Families do not have to be coming to the clinic to use the hotline.

As Dr. Naylor's experience at the clinic has shown, when health practitioners get involved in teaching practical information and helping families use it, everybody benefits. "Conferences like this one contribute to helping professionals and mothers learn," Dr. Naylor says.

Opportunities for training continue

Both before and after the teleconference, state coordinators tailored the arrangements to respond to the needs and interests of professionals in their states.

For instance, in Atlanta, state coordinators planned and presented a 30-minute program on infant mortality to precede the broadcast. The presentation featured an expert on infant mortality in Georgia from the state department of health and human services. A member of the Georgia Extension Service prepared fact sheets on "Drugs Excreted in Human Milk" and "Fetal Alcohol Syndrome" to supplement the broadcast.

Many participants have expressed interest in using tapes of the teleconference in coming months for training groups that did not attend the broadcast. For example, the Extension Service in Ohio and Georgia will be showing copies of the broadcast at their annual conferences this year.

Mae Martha Johnson, who organized New Mexico's viewing, feels the teleconference is an excellent training tool. "You can go through a whole year of journals before you'd get that much information on one particular topic," she says.

USDA and DHHS have the tapes of the teleconference available for

loan or purchase. The presentations on substance abuse and human lactation and breastfeeding are available separately, with each edited down to less than an hour in length.

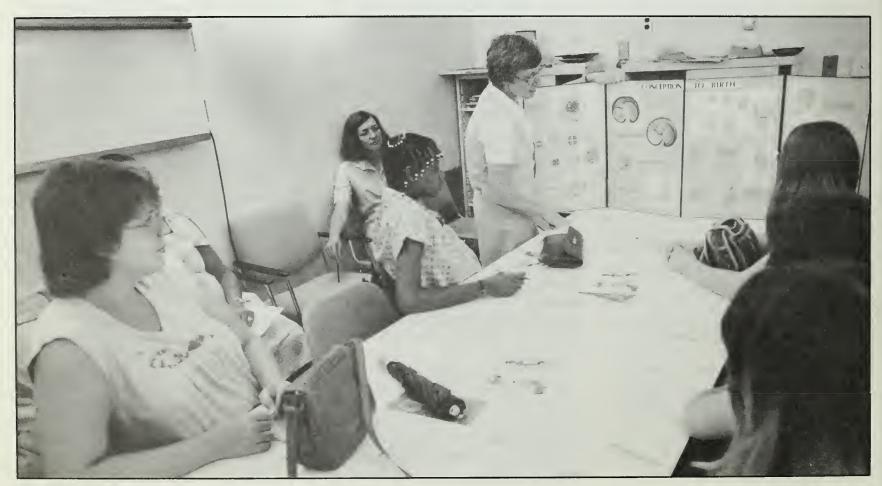
The American Dietetic Association, the American Nurses Association, and the American Academy of Family Physicians all offered continuing education credits at the time of the original airing of the conference. Members of these associations may wish to inquire about obtaining credit for later viewing of the tapes.

For more information on the video teleconference, or for information on obtaining copies of the video tapes, contact:

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article by Carol M. Stansfield



Food and Education

Go Hand in Hand In Oklahoma



Volunteers from Community Action arrive at the Will Rogers Court Community Center in Oklahoma City with the day's meals. All the meals for the

elderly are prepared in a central kitchen, which provides food to several other community centers in Oklahoma City.

A van stops at a small frame home outside of Oklahoma City and an elderly woman, with assistance from the driver, climbs aboard.

She is en route to the Will Rogers Court Community Center, where she will meet friends for a game of dominoes, compare crochet techniques with other women about her age, or just sit and visit with people in the center. Around noon, she will join the others in a simple, yet well-balanced meal designed to meet the special needs of someone her age. The center may be the one social contact of her day, and the food the one balanced meal.

Similar scenes take place each day at thousands of community centers throughout the country. What's interesting about Will Rogers—and 188 other community centers in

Oklahoma—is the way state and local food program managers are combining nutrition education with meals and companionship.

Each month, the center offers classes on nutrition tailored to the particular needs and interests of older people. The classes are conducted by the staff dietitian, student nurses, a representative of the Oklahoma State University Extension Service, or a home economist from the Oklahoma Department of Human Resources.

The Department of Human Resource's Food and Nutrition Unit administers both the Food Stamp and Food Distribution Programs for the state. The nutrition education classes offered to the elderly are part of a statewide effort to help food stamp participants of all ages

learn more about diet and health.

According to Marilyn Henderson, coordinator of Oklahoma's nutrition education program, the communal dining centers are a particularly good way to reach elderly food stamp participants since many of them come to the centers. At the Will Rogers center, for example, most meal participants also receive food stamps.

Activities are lively and fun

Working with the elderly presents special challenges for nutrition educators. "You're talking with people who have been doing things a certain way for a long time," says Henderson. "Their eating habits are set, and it's hard to get them to make changes.

"We've found," she adds, "you get better results if you can show them what you're saying by using visuals. For example, to show them how much fat is in potato chips, we actually burn some potato chips and watch the grease burn off. We make a bottle of orange soda pop to show them how much sugar is in it."

Many elderly people need to limit their salt intake. Included in the lessons is advice on how to look for unexpected sources of salt. "We show them how to read labels to see how much salt is in a particular product," Henderson says. "They're amazed to see how much salt you get from sources other than table salt. We also talk about food and drug interaction."

A few years ago, state food program managers got some clues on participants' needs from a study of food stamp households in two Oklahoma counties. The study showed that more than half—56 percent—of all food stamp participants there were 60 years of age or older.

Most people responding to the survey questionnaire reported eating foods from three of the four major food groups on a regular basis. Seventy-one percent had milk and cheese every day. Seventy-nine percent ate some meat, poultry, fish, beans, or eggs daily. Ninety percent included breads and cereals in their daily diet. But only 25 percent ate fruits and vegetables every day.

Encouraging people to make changes in their diets—like eating more fruits and vegetables—is not easy. Marilyn Henderson, her staff, and local food program managers make nutrition education activities lively, interesting, and fun. Each center has some kind of nutrition activity at least once every 4 weeks. State home economists visit each center on the average of once every 6 months.

"Elderly people enjoy the activities tremendously," says Henderson. "It's hard to get their attention sometimes because we're competing with all sorts of social activities." But, she says, they are usually eager to take part. To supplement activities at the centers, the state staff has put together a special cookbook for the elderly. They've also reprinted the USDA pamphlet, Cooking for One or Two.

Nutrition lessons for families, too

In addition to their work with the elderly, Oklahoma nutrition specialists also work with families in a variety of group settings. They go where the people are—churches,

Marilyn Henderson, coordinator of Oklahoma's nutrition education program, shows a group of elderly people how much sugar is in a bottle of

orange soda. People learn more, she says, with hands-on demonstrations and activities that are lively and fun.

Head Start centers, PTA meetings—armed with film strips, posters, puppets and hands-on projects to help demonstrate what's a nutritional bargain and what isn't.

Among their students are home care providers, trained by the Department of Human Services through the state's Non-Technical Medical Care Program, whose work with elderly clients includes planning meals and preparing special diets.

The nutrition specialists also do one-to-one nutrition counseling with families at health fairs throughout the state. Between July 1982 and June 1983, they estimate they reached nearly 15,300 people through all their various nutrition activities.

Last spring, USDA Secretary
John R. Block visited Oklahoma to
see firsthand the state's one-of-akind nutrition education program.
"The program is unique," he told a
senior citizen's group at the Will
Rogers Court Community Center.
"Oklahoma is the only state in the
nation that has a nutrition education
program staff going across the state
to tell people how they can get the
best nutrition for their money."

Secretary Block wound up his visit with a pop quiz for the senior citizens on Marilyn Henderson's "Supermarket Survival" curriculum:

"Are you going to these classes?" Block asked.

"Yes," they chorused. "We had one yesterday."

"Are they any good?" Heads nodded.

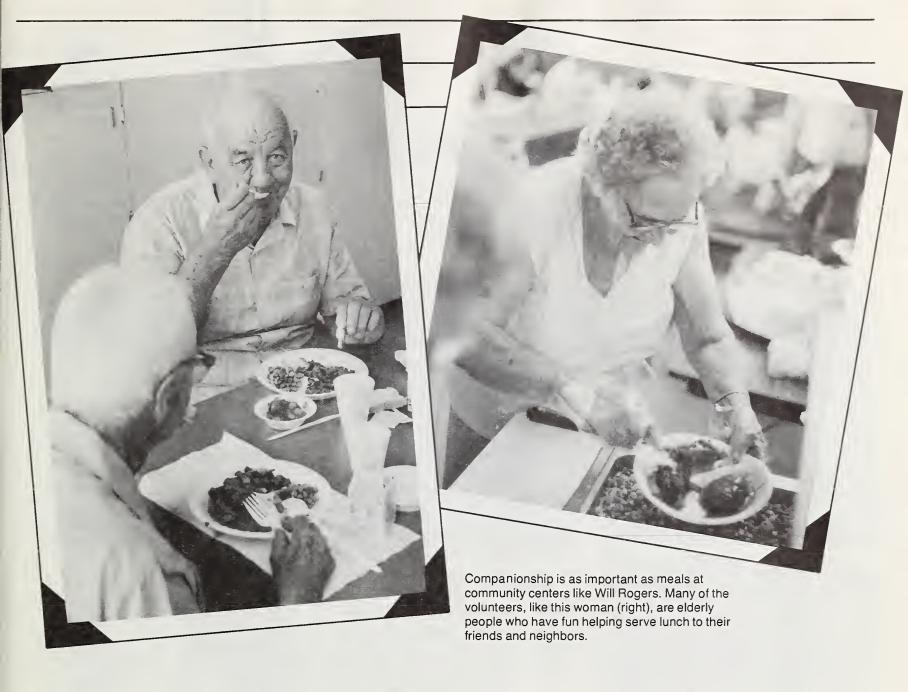
"Are you learning anything?"

"We're learning how to read those labels," a white-haired woman responded. "If you're a diabetic like me, those first three ingredients can tell you what you need to stay away from."

Participation averages around 85 per day at the Will Rogers Center. Some people come only for the meal and then leave, but most of the elderly participate in the center's activities.

Meals include food from USDA

The meals include foods donated by USDA through the Food Distribu-



tion Program. According to John Hooper, who heads Oklahoma's Food and Nutrition Unit, about half the foods used in the meals programs for the elderly are USDA-donated foods. While states have the option of receiving cash instead of donated foods for meals served to the elderly, Hooper sees definite advantages to the donated foods option.

"The volume and quantity of food we get with our entitlement is much greater than what we would get if we were to cash out and purchase locally," he says. "Even if all the sites bought together, they couldn't buy in volume the way USDA can."

When the elderly meals program began several years ago, the sites received only staples, like flour, oil, cheese, and butter. Today, they receive a full range of foods, including meats and canned fruits and vegetables. The state staff assists the local sites by testing the foods, providing recipes, and reviewing menus. The sites order directly from

the state office and receive shipments about every 6 weeks.

In Oklahoma City, the meals program is sponsored by Communty Action, a nonprofit community services agency. The meals are prepared at a central kitchen and delivered in bulk to local sites. In addition to the people served at the centers, meals are also delivered to those who are temporarily housebound. The Meals on Wheels Program serves those who are confined to their homes on a long-term basis.

Elderly benefit in many ways

Mary Lewis, assistant project director who helped open the meals program in 1974, says volunteers play an important role at the centers. "Only one paid employee is used to serve the food," she says. "The rest are volunteers."

Help is not limited to meals, though. The whole Oklahoma City community steps in to assist the elderly, Lewis points out. Department stores and other businesses provide clothing and other gifts at Christmas. One local philanthropist provides a monthly bingo party for the seniors. In addition to prizes, he also gives them a free meal at a local cafeteria.

Do the meals and activities make a difference in the lives of the elderly?

"Even their appearance improves after they come to the center," says Jackie Edwards, community services district director. "They are more concerned about their looks—and they are obviously happier."

Like the meals served to children through the National School Lunch Program, the meals served through the nutrition program for the elderly are contributing to good health.

For more information on Oklahoma's nutrition education or meals programs, write:
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